

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. **10606237**

FILING DATE **06-26-03**

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2		/				
3		/				
4		/				
5		/				
6		/				
7		/				
8		/				
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46		/				
47		/				
48		/				
49		/				
50	/					
TOTAL IND.	←		←		←	
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

	IND		DEP		IND		DEP		IND		DEP	
51			/									
52	/											
53			/									
54			10									
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97												
98												
99												
100												
TOTAL IND.	8		←		←		←		←		←	
TOTAL DEP.	55		←		←		←		←		←	
TOTAL CLAIMS	63											